



Clinical Edit Criteria Proposal

Drug/Drug (Prepare Prepare	Date: April 23, 2008				
New Criteria	a	Revision of E	existing Criteria		
Executive Summary					
Purpose:	Ensure appropriate utilization and control of Lyrica [©] (pregabalin).				
Why was this Issue Selected:	Lyrica® is a branded drug product containing pregabalin. Pregabalin is a GABA analogue with structural similarity and actions similar to gabapentin. It has demonstrated efficacy for the management of neuropathic pain associated with diabetic peripheral neuropathy, postherpetic neuralgia, and as adjunctive therapy for adults with partial onset seizures. Lyrica® is the first FDA approved treatment for both of these neuropathic pain states. Lyrica® has linear pharmacokinetics and has been designated as a Schedule V controlled substance. For patients who don't respond to gabapentin, Lyrica® may be a useful alternative.				
Program- specific information:	 Drug Lyrica[®] Gabapentin **Monthly cost for treatment of epile 	Dosage 50mg TID 300mg TID epsy, partial seizure in adults	Monthly Cost** \$178.20 AWP \$119.66 AWP		
Setting & Population:	All patients.				
Type of Criteria:	☐ Increased risk of ADE	☐ Non-Pref	ferred Agent		
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Data Sources: ☐ Only administrative ☐ Databases + Prescriber-supplied

Setting & Population

• Drug for review: Lyrica® (pregabalin)

Age range: All ages

· Gender: Male and female

Approval Criteria

• Appropriate Diagnosis:

o Therapy will be approved for the following indications:

Condition	Submitted ICD-9 Diagnoses	Inferred Drugs
Peripheral Neuropathy	250.6x	
assoc. with diabetes	356.9x	Yes
	357.2x	
Postherpetic Neuralgia	053.12x	
	053.13x	
	357.0x	
Partial Epilepsy	345.4x	
	345.5x	
Fibromyalgia	729.1	

Compliance on Lyrica therapy.

Denial Criteria

Failure to meet approval criteria.

References

- 1. Facts and Comparisons, p.1006 1043c. 2005.
- 2. USPDI, Micromedex, 2005.
- 3. Pfizer, Inc., AMCP Formulary Submission Dossier Lyrica®, Parsippany, NJ. 07054. August 2005/2007.

